The Affordable Care Act: Local Approaches to Outreach and Enrollment

Michelle Chuk Zamperetti, MPH
Senior Advisor
National Association of County and City Health Officials

Bruce Dart, PhD
Director
Tulsa Health Department
Tulsa, Oklahoma

Dr. Karen DeSalvo, M.D.
Health Commissioner
New Orleans, Louisiana

Janis Koch
Chief Performance Operator
Clark County Public Health
Vancouver, Washington
Michelle Chuk Zamperetti
Senior Director
NACCHO
Please select the two topics of most interest for future ACA webinars.

- Billing and service evolution
- Tools for managing ACA transition
- Delivery and finance models
- Federal/State public health laws
- Health system transformation
- Outreach and enrollment
- Care management
- Population health initiatives
- Maternal and child health reform
- Prevention, early intervention

Submit  Skip to Results
Please select the two topics of most interest for future ACA webinars.

- Billing and service evolution
- Tools for managing ACA transition
- Delivery and finance models
- Federal/State public health laws
- Health system transformation
- Outreach and enrollment
- Care management
- Population health initiatives
- Maternal and child health reform
- Prevention, early intervention

[Submit] [Skip to Results]
Bruce Dart, PhD
Director, Tulsa Health Department
Tulsa, Oklahoma
Oklahoma Governmental Public Health Structure

Public Health Services in Oklahoma are directed and administered by an infrastructure mandated by Oklahoma statute that consists of:

- State Health Agency
- Head of State Health Agency
- State Board of Health
- Regional/District Health Offices
- State-local Liaison
- Local Public Health Agencies
- Local Health Officer
- Local Board of Health
Local Health Departments in Oklahoma

Local Public Health Agencies in Oklahoma consist of sixty-nine local public health agencies:

- Sixty-seven are county health departments
- Two are city-county health departments
- Counties with more than 225,000 population are considered “autonomous” counties and have free-standing health departments that are independent from the state health department.
  - Oklahoma and Tulsa counties fall into this category.
Oklahoma Situation

- Oklahoma opted out of building a state-run Insurance Marketplace Exchange.
  - Utilize federally facilitated Marketplace Exchange

- Governor declined Medicaid Expansion

- It is estimated 144,480 low-income non-elderly adults in Oklahoma will be stuck in a "coverage crater," ineligible for Medicaid and unable to buy subsidized insurance at the Marketplace
Oklahoma and Our governor Does Care!!

The Governor is committed to working with stakeholders to develop an Oklahoma plan with the following goals:

- Reduce the number of uninsured families in Oklahoma
- Improve population health outcomes
- Bend the cost of healthcare and ensure long-term financial sustainability
  - Empower individuals to be engaged in making good healthcare and health choices
  - Support the purchase of private health insurance products
  - Realign the public health system to support these goals
- Address concerns about the strain of uncompensated care
- Explore community health teams and team-based care to increase healthcare system capacity and improve efficiency
How will Oklahomans get help finding insurance on the marketplace?

- **Navigators** are comprehensively trained entities that will assist consumers with identifying what subsidies they qualify for and enrolling in a health plan.
  - In Oklahoma, navigators will be Cardon Outreach, Oklahoma Community Health Centers, Inc., Little Dixie Community Action Agency, Inc., etc.

- **Certified Application Counselors** are organizations, typically community based non-profits, who will educate consumers about the marketplace and assist with completing an application for coverage.

- **Agents and Brokers** are paid by insurance companies to sell coverage and will be available to enroll consumers in health plans through the marketplace.
Healthcare Spending vs. Health Outcomes

We spend so much... You think we'd be healthier...

Overall Health System Performance

Source: Commonwealth Fund Scorecard on Local Health System Performance, 2012.
## We’re in the Bottom

Bottom 10% of Local Areas

<table>
<thead>
<tr>
<th>Rank</th>
<th>City, State</th>
<th>Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>276</td>
<td>Metairie, LA</td>
<td>469,603</td>
</tr>
<tr>
<td>276</td>
<td>New Orleans, LA</td>
<td>639,673</td>
</tr>
<tr>
<td>278</td>
<td>Paducah, KY</td>
<td>371,499</td>
</tr>
<tr>
<td>279</td>
<td>Lake Charles, LA</td>
<td>271,045</td>
</tr>
<tr>
<td>279</td>
<td>Tyler, TX</td>
<td>572,677</td>
</tr>
<tr>
<td>281</td>
<td>Memphis, TN</td>
<td>1,814,827</td>
</tr>
<tr>
<td>281</td>
<td>Tulsa, OK</td>
<td>1,373,182</td>
</tr>
<tr>
<td>283</td>
<td>Gulfport, MS</td>
<td>196,812</td>
</tr>
<tr>
<td>283</td>
<td>Houston, TX</td>
<td>6,369,027</td>
</tr>
<tr>
<td>283</td>
<td>Jonesboro, AR</td>
<td>234,106</td>
</tr>
<tr>
<td>286</td>
<td>Houma, LA</td>
<td>279,132</td>
</tr>
<tr>
<td>286</td>
<td>Lawton, OK</td>
<td>205,383</td>
</tr>
<tr>
<td>288</td>
<td>Charleston, WV</td>
<td>833,536</td>
</tr>
<tr>
<td>288</td>
<td>Lubbock, TX</td>
<td>705,146</td>
</tr>
<tr>
<td>290</td>
<td>Jackson, TN</td>
<td>335,391</td>
</tr>
<tr>
<td>291</td>
<td>Huntington, WV</td>
<td>361,141</td>
</tr>
<tr>
<td>291</td>
<td>Wichita Falls, TX</td>
<td>205,297</td>
</tr>
<tr>
<td>293</td>
<td>Abilene, TX</td>
<td>294,137</td>
</tr>
<tr>
<td>294</td>
<td>Lexington, KY</td>
<td>1,518,597</td>
</tr>
<tr>
<td>295</td>
<td>Florence, SC</td>
<td>359,716</td>
</tr>
<tr>
<td>295</td>
<td>Tupelo, MS</td>
<td>394,380</td>
</tr>
<tr>
<td>297</td>
<td>Meridian, MS</td>
<td>201,585</td>
</tr>
<tr>
<td>298</td>
<td>Oklahoma City, OK</td>
<td>1,879,596</td>
</tr>
<tr>
<td>298</td>
<td>Shreveport, LA</td>
<td>700,013</td>
</tr>
<tr>
<td>300</td>
<td>Jackson, MS</td>
<td>1,070,263</td>
</tr>
<tr>
<td>301</td>
<td>Alexandria, LA</td>
<td>292,937</td>
</tr>
<tr>
<td>301</td>
<td>Texarkana, AR</td>
<td>261,650</td>
</tr>
<tr>
<td>303</td>
<td>Beaumont, TX</td>
<td>464,624</td>
</tr>
<tr>
<td>304</td>
<td>Hattiesburg, MS</td>
<td>316,829</td>
</tr>
<tr>
<td>304</td>
<td>Oxford, MS</td>
<td>152,428</td>
</tr>
<tr>
<td>306</td>
<td>Monroe, LA</td>
<td>270,188</td>
</tr>
</tbody>
</table>

Source: Commonwealth Fund Scorecard on Local Health System Performance, 2012.
Oklahoma’s Health Care Marketplace  
(what the public is being told)

Open Enrollment begins - October 1, 2013

Apply online at www.healthcare.gov.

1. Open your account.
   
   “The forms are easy to understand and the site lets you know what information you will need close by to continue. Start shopping the options, and complete your application”

2. If you have questions, call 1-800-318-2596. Information is available 24/7 in 140 languages. If you chat online, use the chat feature in the applications.

3. Have questions or need further assistance in Oklahoma you can dial 2-1-1 or go on-line at www.211Oklahoma.org to find help in locating a Marketplace Navigator assistance site near you.
Navigator Assistance in Oklahoma

Navigators- Agencies in OK funded by CMS:

- Oklahoma Primary Care Association- Lead for a collaboration of agencies providing assistance throughout Oklahoma

- Little Dixie Community Action Agency – Lead agency for a collaboration of Community Action Agencies providing Navigator assistance

- Federally Qualified Community Health Centers - many will also have trained navigators

Navigators Not funded by CMS:

- Tulsa Health Department
How is THD Negotiating this Environment?

- Tulsa Health Department has applied for and received confirmation as A Certified Application Counselor designated agency.

- We have 8 outreach and social work staff currently trained to assist and have plans for 4 more staff to be trained to help our clients that present with enrollment needs.

- We provide coverage at our 3 Regional Health Centers upon request. We have also assisted residents at the Tulsa’s main Public Library and when out on home visitations.

- Clients that are in the “crater” are referred to Federally Qualified Health Centers in our community (Morton, Indian Health Care Resource Center, Community Health Connections) for reduced cost medical care.

- At least one of our trained assistors sits in on the weekly updates on the marketplace enrollment.
Outreach and enrollment activities happening in Tulsa Outside of THD & FQHCs

- 211 (Regional Helpline) asks all callers if they have health insurance and encouraging them to log onto the website or call the 800 number to apply if they say no.

- There are some opportunities to enroll at the library and at those events individuals enroll via survey monkey to save a spot, this allows for some evening appointment times. This information is shared on our state primary care association website and 211 website.
Health Care Navigators at the Library

A Navigator is trained and able to help consumers, small businesses, and their employees as they look for health coverage options through the Marketplace, including completing eligibility and enrollment forms.

Navigators will be at these Tulsa City-County Library locations to answer questions about the Affordable Care Act and to assist anyone needing help registering for and purchasing insurance through the Marketplace.

- MONDAY, Nov. 18 • 6-8 p.m. : Rudisill Regional Library 1520 N. Hartford
- TUESDAY, Nov. 19 • 11 a.m.-1 p.m. : Librarium 1110 S. Denver Ave.
- THURSDAY, Dec. 5 • 1-3 p.m. : Broken Arrow Library 300 W. Broadway
- TUESDAY, Jan. 7 • 1:30-3:30 p.m. : Martin Regional Library 2601 S. Garnett Rd.
- FRIDAY, Feb. 14 • 1-3 p.m. : Nathan Hale Library 6038 E. 23rd St.
- WEDNESDAY, March 5, • 11 a.m.-1 p.m. : Charles Page Library 551 E. 4th St.

To register for a session visit: https://www.surveymonkey.com/r/librarynavigators
Questions about these sessions, phone: 918-549-7430

Free and Open to the Public • TulsaLibrary.org • If you are hearing-impaired and need a qualified interpreter, please call the library 48 hours in advance of the program.
THD’s involvement and partnerships to support Outreach and Enrollment

- 211 (regional Helpline agency)

- Morton and Community Health Connections (FQHC’s) all have trained Health Navigators,

- THD has been referring clients back and forth and communicating regarding our challenges, sharing information on events and updates as we learn of them.
Challenges for THD

- Many challenges after the technical ones experienced nationwide are around the inability of ACA to provide health care for the “crater” population
- Being Application/Navigator agency without funding
- Identifying and developing new funding/reimbursement streams
- Working through political/societal issues in Oklahoma that have polarized “ObamaCare”
  - i.e. Citizens who have never had access to healthcare and want/need access are not applying for insurance because of the stigma of the ACA in Oklahoma
- Exploitation on the rise:
  - After enrollment people began receiving calls from scammers who wanted to charge them to assist with enrollment.
Challenges - Continued

- Frustrated clients associated THD with the ACA and just knew “we had a secret backdoor way to get in the system and why couldn’t they use it”?

- Naturalized citizens are having difficulty authenticating their citizenship online. Have to send verification in London, Kentucky, 3 weeks later, still no verification.

- Clients take their frustration out on THD navigator/application staff.

- Certified Application Counselors really function as “counselors” as many clients are nervous to sign up and express fear about the ACA and “Big Brother”

- ACA just can’t win, a community citizen update and signup event for ACA organized by THD community partners was snowed out
Opportunities for THD from Outreach and Enrollment Activities

- Community events and enrollment activities has resulted in THD becoming more integrated with Community medical resources available for all income levels.

- Opportunities for THD to share and partner more intently with community FQHC’s on client needs

- Enrollment activities and has (accidently) put us in the position to become “experts” on finding the best (and most economical fit) for Healthcare.gov participants.

- Have now developed relationships with Insurance providers we previously did not have and are in discussions to collaborate on community prevention programs

- Have assisted healthcare providers in enrolling un/underinsured patients into ACA
Impact of ACA in Tulsa and Oklahoma: The Potential

- Estimated 256,000 Oklahomans are eligible for financial assistance available for people who meet certain income guidelines, according to the Kaiser Family Foundation.

- Based on recent released numbers over 2,000 Oklahoma residents who have applied for coverage through the marketplace were determined eligible for financial assistance, a fraction of the people who are eligible throughout the state.

- Additionally, an estimated 446,000 Oklahomans are eligible to enroll in health insurance through the marketplace, including uninsured residents and people who buy non-group insurance, according to the Kaiser data.
The Reality

- 18.7 percent of Tulsa County residents do not have health insurance.

- Less than 700 Oklahomans selected a health insurance plan using Healthcare.gov.

- Over 10,000 applications have been completed in Oklahoma, meaning hundreds of Oklahomans have gotten through the website's application process but haven't yet taken the next step to sign up for coverage.
Recommendations for Other LHDs in States not Expanding Medicaid

- Communication – with partners and with those who oppose you!!
- Meeting with other health navigators and assistors in your area to brainstorm and connect
- Identify and face all challenges as they come!!
- Celebrate successes.

- U.S. Rep. James Lankford, R-Oklahoma City, pointed out, “More people drove through my local Sonic in Oklahoma City today at lunch than have signed up for Obamacare in Oklahoma since Oct. 1.”

The above quote explains how “Obamacare” is dismissed in Oklahoma, it is probably a similar environment in other states:
Never stop pursuing strategies to help individual citizens and their families access prevention services and the healthcare system,

Without access to prevention and healthcare there will always be a cycle of poverty and an over-burdence of the healthcare system.

Remember:

“Through Perseverance many people win success out of what seemed destined to be certain failure!!”

Benjamin Disraeli
Please select the two topics of most interest for future ACA webinars.

- Billing and service evolution
- Tools for managing ACA transition
- Delivery and finance models
- Federal/State public health laws
- Health system transformation
- Outreach and enrollment
- Care management
- Population health initiatives
- Maternal and child health reform
- Prevention, early intervention

Submit  Skip to Results
Dr. Karen B. DeSalvo, MD, MPH, MSc
Health Commissioner
City of New Orleans, Louisiana
BLUE CITY IN A RED STATE: IMPLEMENTING THE AFFORDABLE CARE ACT IN NEW ORLEANS

Karen B. DeSalvo, MD, MPH, MSc
Health Commissioner, City of New Orleans
December 18, 2013
The Medicaid Coverage Gap

In states that do not expand Medicaid under the ACA, there will be large gaps in coverage available for adults.

IN THE GAP:

- 242,000 in LA
- 66,000 in Greater New Orleans
- Many food service, construction, department store, grocery store, nursing home, hospital, school, child care, and hotels workers

NOTE: Applies to states that do not expand Medicaid. In most states not moving forward with the expansion, adults without children are ineligible for Medicaid.
Making the Most of the Marketplace: Outreach and Enrollment Strategies

- Grass Tops
  - Local elected officials
  - Local leaders and influencers

- Grass Blades
  - Industry and local merchant associations

- Grass Roots
  - Neighborhood Assns.
  - Community-based organizations

CITY OF NEW ORLEANS
Leveraging Existing Outreach Partnerships

GNOCHC Medicaid Waiver

Marketplace +
GNOCHC Medicaid Waiver

YOU COULD QUALIFY FOR PRIMARY CARE COVERAGE

YOU COULD QUALIFY FOR PRIMARY CARE COVERAGE

CITY OF NEW ORLEANS
Enrollment Trends:

- The GNOCHC Enrollment Report is now switching back to a monthly reporting cycle. The last weekly report contained data from 9/25/13, when enrollment was 63,902. The most recent data from 11/6/13 shows GNOCHC enrollment at 62,984, a drop of 918. The most likely reason for the drop is that the program appears to be continuing to dis-enroll people at the beginning of the month and is now also enrolling fewer people because the income limits have shifted from 200% FPL to 100% FPL. The current enrollment number reflects two dis-enrollment periods since the last report (early October and early November).
- 1038 applications were approved in October 2013 and 394 were rejected; 23% were rejected because DHH did not receive necessary data from the applicant.
- The program now contains 88% of enrollees between 0%-133% FPL, a slight increase from 86%.
NOHD Outreach Activities: 11/23 – 11/29/13

- Fringe Festival Tabling (11/23)
- River Gardens Community Meeting (11/23)
- LPCA Outreach and Enrollment Meeting (11/25)
- YMCMB Health Fair (11/26)

Upcoming NOHD Outreach Activities: 11/30-12/7/13

- WAYLA Community Event on Marketplace (12/2/13)
- Cuddly Bear Childhood Development Presentation (12/4/13)

Assists = Assessing consumer needs/knowledge, education about basic insurance topics, creating an account or updating an account profile
Outreach = individuals given a general overview of the marketplace and what it provides in a group setting
Connecting with Residents

CITY OF NEW ORLEANS
Thank you

kdesalvo@nola.gov
Please select the two topics of most interest for future ACA webinars.

- Billing and service evolution
- Tools for managing ACA transition
- Delivery and finance models
- Federal/State public health laws
- Health system transformation
- Outreach and enrollment
- Care management
- Population health initiatives
- Maternal and child health reform
- Prevention, early intervention

Submit  Skip to Results

Poll Results

Total Responses: 0

<table>
<thead>
<tr>
<th>Answer</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Billing and service evolution</td>
<td>0</td>
</tr>
<tr>
<td>Tools for managing ACA transition</td>
<td>0</td>
</tr>
<tr>
<td>Delivery and finance models</td>
<td>0</td>
</tr>
<tr>
<td>Federal/State public health laws</td>
<td>0</td>
</tr>
<tr>
<td>Health system transformation</td>
<td>0</td>
</tr>
<tr>
<td>Outreach and enrollment</td>
<td>0</td>
</tr>
<tr>
<td>Care management</td>
<td>0</td>
</tr>
<tr>
<td>Population health initiatives</td>
<td>0</td>
</tr>
<tr>
<td>Maternal and child health reform</td>
<td>0</td>
</tr>
<tr>
<td>Prevention, early intervention</td>
<td>0</td>
</tr>
</tbody>
</table>
WHAT REFORM LOOKS LIKE IN CLARK COUNTY, WASHINGTON

- HCA (Health Care Authority)
  - Medicaid Only

- DSHS (Department of Social and Health Services)
  - Classic Medicaid Only

- HBE (Health Benefit Exchange)
  - Self Enrollment

In-Person Assistor Agencies

28 February 2014
HOW WE ARE REACHING PRIORITY POPULATIONS
PARTNER NETWORK AND IN-PERSON ASSISTERS
OUTREACH AND ENROLLMENT EVENTS

The Mall Library Connection

FAITH-BASED COFFEE

A PERFECT FIT FOR A BETTER COMMUNITY

COME JOIN THE CONVERSATION IN 2014:
DATE: 4TH THURSDAY OF THE MONTH
TIME: 9-11 AM
LOCATION: TRINITY LUTHERAN CHURCH (395 W 39TH STREET)

DIVISION OF CHILDREN AND FAMILY SERVICES
MENTORING PROGRAMS
SCHOOLS
CIVIC GROUPS
FAITH COMMUNITIES
PUBLIC HEALTH
GOVERNMENTAL AGENCIES
CHILDREN AND FAMILIES
BUSINESSES

43
## Enrollments Completed

<table>
<thead>
<tr>
<th>Enrolled in</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>QHP (Tax Credit)</td>
<td>15,925</td>
</tr>
<tr>
<td>QHP (No Tax Credit)</td>
<td>4,219</td>
</tr>
<tr>
<td>Medicaid</td>
<td>159,186</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>179,330</td>
</tr>
</tbody>
</table>

## In Process Applications

<table>
<thead>
<tr>
<th>Application Status</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>QHP (Need To Pay)</td>
<td>53,913</td>
</tr>
<tr>
<td>In Process</td>
<td>72,136</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>126,049</td>
</tr>
</tbody>
</table>
Progress Toward January 1, 2014 Enrollment Targets

<table>
<thead>
<tr>
<th>Adult Client Count</th>
<th>Percent of Goal Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Juan</td>
<td>277</td>
</tr>
<tr>
<td>Wahkiakum</td>
<td>71</td>
</tr>
<tr>
<td>Jefferson</td>
<td>562</td>
</tr>
<tr>
<td>Whatcom</td>
<td>2,457</td>
</tr>
<tr>
<td>Spokane</td>
<td>6,206</td>
</tr>
<tr>
<td>Thurston</td>
<td>2,659</td>
</tr>
<tr>
<td>Pacific</td>
<td>343</td>
</tr>
<tr>
<td>Columbia</td>
<td>41</td>
</tr>
<tr>
<td>Kitsap</td>
<td>2,128</td>
</tr>
<tr>
<td>King</td>
<td>17,038</td>
</tr>
<tr>
<td>Asotin</td>
<td>233</td>
</tr>
<tr>
<td>Chelan</td>
<td>851</td>
</tr>
<tr>
<td>Okanogan</td>
<td>558</td>
</tr>
<tr>
<td>Clallam</td>
<td>870</td>
</tr>
<tr>
<td>Klickitat</td>
<td>275</td>
</tr>
<tr>
<td>Pierce</td>
<td>6,715</td>
</tr>
<tr>
<td>Skagit</td>
<td>1,101</td>
</tr>
<tr>
<td>Douglas</td>
<td>379</td>
</tr>
<tr>
<td>Stevens</td>
<td>527</td>
</tr>
<tr>
<td>Lincoln</td>
<td>96</td>
</tr>
<tr>
<td>Pend Oreille</td>
<td>158</td>
</tr>
<tr>
<td>Island</td>
<td>650</td>
</tr>
<tr>
<td>Clark</td>
<td>3,739</td>
</tr>
<tr>
<td>Snohomish</td>
<td>5,188</td>
</tr>
<tr>
<td>Walla Walla</td>
<td>476</td>
</tr>
<tr>
<td>Lewis</td>
<td>953</td>
</tr>
<tr>
<td>Grays Harbor</td>
<td>823</td>
</tr>
<tr>
<td>Cowlitz</td>
<td>1,143</td>
</tr>
<tr>
<td>Mason</td>
<td>561</td>
</tr>
<tr>
<td>Adams</td>
<td>166</td>
</tr>
<tr>
<td>Garfield</td>
<td>12</td>
</tr>
<tr>
<td>Skamania</td>
<td>80</td>
</tr>
<tr>
<td>Ferry</td>
<td>70</td>
</tr>
<tr>
<td>Benton</td>
<td>1,326</td>
</tr>
<tr>
<td>Kittitas</td>
<td>454</td>
</tr>
<tr>
<td>Franklin</td>
<td>638</td>
</tr>
<tr>
<td>Whitman</td>
<td>319</td>
</tr>
<tr>
<td>Grant</td>
<td>675</td>
</tr>
<tr>
<td>Yakima</td>
<td>2,457</td>
</tr>
</tbody>
</table>

TOTAL = 63,269*
As of November 28, 2013

*24 additional clients do not map to Washington counties.

Questions?
General Resources

NACCHO:  http://www.naccho.org/

Stay Connected:
Sign up to get email and text alerts at signup.healthcare.gov
Updates and resources for partner organizations are available at
Marketplace.cms.gov
Twitter: @HealthCareGov, @CuidadoDeSalud
Facebook:  facebook.com/Healthcare.gov,
facebook.com/CuidadoDeSaludgov
Contacts

Michelle Chuk Zamperetti, MPH
Senior Advisor, NACCHO
mzamperetti@naccho.org

Bruce Dart, PhD
Director, Tulsa Health Department
bdart@tulsa-health.org

Dr. Karen DeSalvo, M.D.
Health Commissioner, City of New Orleans
kdesalvo@nola.gov

Janis Koch
Chief Performance Operator, Clark County Public Health
Janis.koch@clark.wa.gov